

2025 Medicare Part D Step Therapy Requirements

Effective: November 1st, 2025

INSULIN SUPPLY

MEDICATION(S) SUBJECT TO STEP THERAPY

ALCOHOL PREP PADS, ALCOHOL SWABS, DROPSAFE PREP PADS, GNP STERILE GAUZE PADS 2" X 2", STERILE GAUZE PADS 2" X 2", GAUZE PADS & DRESSINGS, INSULIN PEN NEEDLE, INSULIN SYRINGE (DISP) U-100 0.3 ML, INSULIN SYRINGE (DISP) U-100 1/2 ML, INSULIN SYRINGE (DISP) U-100 1 ML, ISOPROPYL ALCOHOL 0.7 ML/ML MEDICATED PAD, FT STERILE PADS 2" X 2", TRUE COMFORT PRO ALCOHOL PADS

CRITERIA

IN ORDER TO ASSIST IN PAYMENT DETERMINATION, A PRIOR CLAIM SEEN FOR AN INJECTABLE INSULIN WITHIN THE PAST 120 DAYS WILL QUALIFY FOR PART D PAYMENT.

MUPIROCIN

MEDICATION(S) SUBJECT TO STEP THERAPY

MUPIROCIN 2% CREAM

CRITERIA

PRIOR USE OF MUPIROCIN OINTMENT WITHIN THE PREVIOUS 12 MONTHS.

RYTARY

MEDICATION(S) SUBJECT TO STEP THERAPY

CARBIDOPA-LEVO ER 23.75-95 CAP, CARBIDOPA-LEVO ER 36.25-145 CP, CARBIDOPA-LEVO ER 48.75-195 CP, CARBIDOPA-LEVO ER 61.25-245 CP, RYTARY

CRITERIA

PRIOR USE OF CARBIDOPA-LEVODOPA IMMEDIATE RELEASE OR EXTENDED RELEASE WITHIN THE PREVIOUS 12 MONTHS.

TAZAROTENE

MEDICATION(S) SUBJECT TO STEP THERAPY

TAZAROTENE 0.05% CREAM, TAZAROTENE 0.05% GEL, TAZAROTENE 0.1% GEL

CRITERIA

PRIOR USE OF TAZAROTENE 0.1% CREAM WITHIN THE PREVIOUS 12 MONTHS.